

PTO/SB/22 (12-04)

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (Fee pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		Docket Number (Optional) 68775-042
Application Number 09/933,265		Filed August 20, 2001
For CONTROLLING MULTIPLE NODES TO EXECUTE MESSAGES ONLY ONCE		
Art Unit 2666		Examiner Dang T. TON

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This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	<u>Fee</u>	<u>Small Entity Fee</u>	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$ _____
<input type="checkbox"/> Two month (37 CFR 1.17(a)(2))	\$450	\$225	\$ _____
<input checked="" type="checkbox"/> Three month (37 CFR 1.17(a)(3))	\$1020	\$510	<u>\$ 1020</u>
<input type="checkbox"/> Four month (37 CFR 1.17(a)(4))	\$1560	\$795	\$ _____
<input type="checkbox"/> Five month (37 CFR 1.17(a)(5))	\$2160	\$1080	\$ _____

- Applicant claims small entity status. See 37 CFR 1.27.
- A check in the amount of the fee is enclosed.
- Payment by credit card. Form PTO-2038 is attached.
- The Director has already been authorized to charge fees in this application to a Deposit Account.
- The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. 16-2600. I have enclosed a duplicate copy of this sheet.

WARNING: Information on this form may become public. Credit card information should not be included on this form.
Provide credit card information and authorization on PTO-2038.

I am the applicant/inventor. _____

assignee of record of the entire interest. See 37 CFR 3.71. _____ Signature _____
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96) _____

attorney or agent of record. Registration number 29,292. _____ Typed or printed name _____

attorney or agent acting under 37 CFR 1.34. _____ Registration number if acting under 37 CFR 1.34. _____ Telephone number _____

Abigail Cousins
Signature

12/21/2005

Date

Abigail Cousins
Type or printed name

(212) 969-3000

Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.
Submit multiple forms if more than one signature is required, see below.

- Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.26(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 8 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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